



COPY OF PAPERS  
ORIGINALLY FILED

3/CFR  
8.5m  
4/2/02  
Page 1 of 2

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/986,832	11/13/2001	3682	370		8	9	1

CONFIRMATION NO. 6139

FILING RECEIPT



\*OC00000007119511\*

Cyrus Varan  
236 Vipond Road  
Whangaparaoa, 1463  
NEW ZEALAND

GORDON FALL  
8716 Granite Lane  
Laurel, MA  
20708

Date Mailed: 11/26/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Cyrus O. Varan, Whangaparaoa, NEW ZEALAND;

Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/253,093 11/28/2000

Foreign Applications

If Required, Foreign Filing License Granted 11/26/2001

Projected Publication Date: 05/30/2002

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

Title

Mechanism for driving bicycles

Preliminary Class

074

RECEIVED

APR 02 2002

GROUP 3600



COPY OF PAPERS  
ORIGINALLY FILED

Dr. Cyrus Varan  
238 Vipond Rd. Stanmore Bay  
Whangaparaoa Peninsula, N.Z.  
Ph. (09) 428-1270 - Fax (09) 428-1280

Receipt

New Zealand

Jan. 12/02

REF: CHANGE OF  
ADDRESS

09/986, 832  
Mechanism for  
driving bicycles

Commissioner of Patents  
US PATENT OFFICE

Dear Commissioner:

Please forward all future communication  
on above to:

GORDON FALL, Legal Representative  
8716 Granite Lane  
Laurel, MD 20708  
(301) 953-7392 USA

I have granted Mr. Fall the power  
to act on my behalf for legal  
representation.

Sincerely, C. Varan



## UNITED STATES PATENT AND TRADEMARK OFFICE

FILE COPY

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6139

<b>SERIAL NUMBER</b> 09/986,832	<b>FILING DATE</b> 11/13/2001 <b>RULE</b>	<b>CLASS</b> 074	<b>GROUP ART UNIT</b> 3618	<b>ATTORNEY DOCKET NO.</b>
------------------------------------	---	---------------------	-------------------------------	----------------------------

**APPLICANTS**  
Cyrus O. Varan, Whangaparaoa, NEW ZEALAND;

**\*\* CONTINUING DATA \*\*\*\*\*** *Verified* *MZ* **RECEIVED**  
THIS APPLN CLAIMS BENEFIT OF 60/253,093 11/28/2000  
**APR 02 2002**

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None* *MZ* **GROUP 3600**

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
\*\* 11/26/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> NEW ZEALAND	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 1
--	--	----------------------------	--------------------------	--------------------------------

35 USC 119 (a-d) conditions met  
☐ yes ☐ no ☐ Met after Allowance

Verified and Acknowledged  
Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
Gordon ~~Fel~~  
Legal Representative  
8716 Granite Lane  
Laurel, MD 20708

**TITLE** *should be Maryland*  
Mechanism for driving bicycles

<b>FILING FEE RECEIVED</b> 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---